

Functional Classification Worksheet

Road Name: _____ Length: _____

Limits (termini): _____

Current Functional Classification: _____

Proposed Functional Classification: _____

Most recent traffic count (ADT): _____ Year: _____

Is this request consistent with the transportation plan? (circle one) Yes or No

Has the local agency (owner) committed to funding any construction projects on this route (i.e. new construction, improvements, etc) , excluding or outside of any Federal funds?

(circle one) Yes or No

If yes, attach a copy of any documentation to this request

Has the regional planning body approved this request? (circle one) Yes or No

If yes, attach a copy of either a) an adopted resolution passed by the regional planning body; or (b) an approved motion shown in the minutes from an official meeting of the regional planning body.

Request Criteria: Describe the reason for this request below (attach additional pages as necessary). If applicable, provide information on any specific traffic generators, population/housing changes (official Census or DES estimates), private or public development in the area, commercial/industrial activity and any other pertinent information that will help to justify this request. Please cite specific data and data sources for all figures used in the justification. Attach a map of the area with the route indicated on the map. Maps may be printed from the ADOT website at <http://tpd.az.gov>. Legible, handwritten notes on the map are acceptable.